



A Publication of the  
BOARD OF NURSING

Volume 12, No. 1

April, 1999

**Scope of Practice Interpretation**

On March 4, 1999, the Practice Committee of the Board of Nursing met to address scope of practice issues which are frequently directed to the board for interpretation of the Wisconsin Nurse Practice Act. The Practice Committee made recommendations which were adopted by the Board of Nursing at its meeting on the same date.

The first recommendation adopted is that registered nurses, **including advanced practice nurse prescribers**, may order diagnostic laboratory testing, X-rays and EKGs only as a delegated medical act. The board emphasized that this act currently may not be considered part of the independent prescriptive authority of the advanced practice nurse prescriber.

Under sec. N6.03(2), Wisconsin Administrative Code, the performance of **any** delegated medical act by a registered nurse, advanced practice nurse, or advanced practice nurse prescriber requires that the nurse shall:

- (a) accept only those delegated medical acts for which there are protocols or written or verbal orders;
- (b) accept only those delegated medical acts for which the R.N. is competent to perform based on his or her nursing education, training or experience;
- (c) consult with a physician, dentist or podiatrist in cases where the R.N. knows or should know a delegated medical act may harm a patient; and,
- (d) perform delegated medical acts under the general supervision or direction of a physician, dentist or podiatrist.

The second recommendation adopted is that it is within the scope of practice of a competent registered nurse to perform the following procedures as nursing acts, pursuant to a valid medical order, without delegation from or supervision by a physician, podiatrist, dentist or optometrist:

- the **removal** of sutures;
- the **reinserting** of a gastrostomy tube;
- the **reinserting** of a tracheostomy tube, including the outer cannula.

Since these are considered nursing acts, registered nurses who delegate these procedures to assistive persons must meet requirements for delegated nursing acts set forth in Chapter N6, Wisconsin Administrative Code.

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<b>Nursing Resource</b>	

There is a new scholarship book published just for nursing students. The book provides a quick and easy way for your nursing students to instantly get information on over 100 scholarships.

“Free Money for Nursing Education--A guide to scholarships and low interest loans available to nursing students” (ISBN 1-57502-498-5), contains over 100 scholarships available to nursing students for undergraduate education. Scholarship awards range from \$500 to \$5,000.

Unlike other scholarship books which are generalized, “Free Money for Nursing Education” focuses on scholarships just for nursing students. Edited by a registered nurse especially for nursing students, this book is an excellent reference for any student or college library with a nursing program.

“Free Money for Nursing Education” is available through:

Medical Resource  
P.O. Box 1937  
New York, NY 10274

The book is also available from Koen Book Distributors, at 1-609-235-4444; Barnes and Noble or on the Internet at [www.Amazon.com](http://www.Amazon.com).

### **Free Nursing Contact Hours**

Department of Legal Medicine

The Journal of Nursing Risk Management 1998

Armed Forces Institute of Pathology

Continuing Education On-Line 3.2 Contact Hours

- This Internet publication at [www.afip.org/legalmed/jnrm.html](http://www.afip.org/legalmed/jnrm.html) is free to full-time military and federal health care providers. The cost to non-federal providers is \$10.00
- Each publication contains valuable clinical practice tips and references.
- DLM publishes the Internet version of *Legal Medicine Open File* at [www.afip.org/legalmed/lmof.html](http://www.afip.org/legalmed/lmof.html) annually. The publications for 1998-1992 contain 5 CME credits each.
- The Department of Legal Medicine has awarded continuing education credits in risk management to health care providers for license renewal since 1991.

### **Articles**

CLINICAL PRACTICE GUIDELINES / MANAGED CARE LIABILITY / EXPERT TESTIMONY IN MALPRACTICE LITIGATION / IATROGENIC DRUG RELATED DISEASES / HEALTH CARE DECISIONS AND THIRD PARTIES / Objectives, Quiz, & Evaluation form.

Telephone: 1-800-863-3263. FAX: 301-295-7217.  
Address: 8403 Colesville Road, Suite 86D, Silver Spring, MD 20910-9813. E-Mail: [openfile@afip.osd.mil](mailto:openfile@afip.osd.mil).  
Webmaster: [marting@afip.osd.mil](mailto:marting@afip.osd.mil).

### **New Caregiver Law**

On October 1, 1998, a new Wisconsin law went into effect which provides new and stringent checks of the backgrounds of persons who provide care for others or have access to persons receiving care.

Beginning on October 1, 1998, the state of Wisconsin mandated that background checks will be required for all persons who seek to be employed in the caregiving industry and for all persons who want to obtain or renew a license to provide care. By October 1, 1999, all existing employees/contractors and license holders must have fulfilled the caregiver background check requirements.

A completed background check as prescribed under Wisconsin's law includes:

- \* A completed self-disclosure Background Information Disclosure form;
- \* An electronic status check of professional licenses and credentials through the Department of Regulation and Licensing;
- \* An electronic criminal history search from the Wisconsin Department of Justice;
- \* An electronic review of records kept by the Department of Health and Family Services for any substantiated findings of abuse or neglect and license restrictions or denials.

Based on the information obtained, additional research may include an out-of-state criminal history search, a tribal court criminal history search, a check of relevant military records or a check of county or other local records.

Once the background research is complete, employers and government agencies are expected to act according to the requirements of the new law coupled with prudent business practices. These new background checks will be used by the state in making employment and licensing decisions since various studies have shown predictable patterns of abuse, neglect and misappropriation. Therefore, a background which includes specific crimes and offenses will effectively exclude individuals from certain employment or prohibit them from obtaining a license to practice certain professions.

Those who wish to obtain more detailed information regarding the new law may do so through accessing

the following web site: “[www.dhfs.state.wi.us](http://www.dhfs.state.wi.us)” and click on “News & Initiatives.”

#### **APNP Malpractice Insurance Coverage**

1997 Wisconsin Act 11

Section 1.619.01(7)(a) of the statutes is amended to read:

619.01(7)(a) Primary coverage plans. Health care liability insurance plans established under this paragraph shall provide minimum coverage to insureds in the amount of not less than \$200,000 for each occurrence and \$600,000 for all occurrences in any one policy year for occurrences before July 1, 1987, \$300,000 for each occurrence and \$900,000 for all occurrences in any one policy year for occurrences on or after July 1, 1987, and before July 1, 1988, \$400,000 for each occurrence and \$1,000,000 for all occurrences in any one policy year for occurrences on or after July 1, 1988, and before July 1, 1997, and \$1,000,000 for each occurrence and \$3,000,000 for all occurrences in any one policy year for occurrences on or after July 1, 1997, for the protection of persons who are legally entitled to recover damages from the insured for errors, omissions or neglect in the performance of the insured’s professional services. If an insured has excess limits liability coverage or such coverage is available to the insured, the coverage provided under such plans shall be equal to the minimum level of such excess limits coverage. If the insured does not have excess limits liability coverage and such coverage is not available to the insured, the commissioner may establish minimum levels of coverage higher than the minimum limits specified in this paragraph for such plans.

Section 2.655.23(4) of the statutes is renumbered 655.23(4)(a) and amended to read:

655.23(4)(a) A cash or surety bond under sub. (3)(d) shall be in amounts of at least \$200,000 for each occurrence and \$600,000 for all occurrences in any one policy year for occurrences before July 1, 1987, \$300,000 for each occurrence and \$900,000 for all occurrences in any one policy year for occurrences on or after July 1, 1987, and before July 1, 1988, and \$400,000 for each occurrence and \$1,000,000 for all occurrences in any one policy year for occurrences on or after July 1, 1988.

Section 3.655.23(4)(b) of the statutes is created to read:

655.23(4)(b) 1. Except as provided in par. (c), before July 1, 1997, health care liability insurance may have

provided either occurrence or claims-made coverage. The limits of liability shall have been as follows:

- a. For occurrence coverage, at least \$200,000 for each occurrence and \$600,000 for all occurrences in any one policy year for occurrences before July 1, 1987, \$300,000 for each occurrence and \$900,000 for all occurrences in any one policy year for occurrences on or after July 1, 1987, and before July 1, 1988, and \$400,000 for each occurrence and \$1,000,000 for all occurrences in any one policy year for occurrences on or after July 1, 1988, and before July 1, 1997.
  - b. For claims-made coverage, at least \$200,000 for each claim arising from an occurrence before July 1, 1987, regardless of when the claim is made, and \$600,000 for all claims in any one reporting year for claims made before July 1, 1987, \$300,000 for each claim arising from an occurrence on or after July 1, 1987, and before July 1, 1987, \$300,000 for each claim arising from an occurrence on or after July 1, 1987, and before July 1, 1988, regardless of when the claim is made, and \$900,000 for all claims in any one reporting year for claims made on or after July 1, 1987, and before July 1, 1988, and \$400,000 for each claim arising from an occurrence on or after July 1, 1988, and before July 1, 1997, regardless of when the claim is made, and \$1,000,000 for all claims in any one reporting year for claims made on or after July 1, 1988, and before July 1, 1997.
2. Except as provided in par. (c), on and after July 1, 1997, health care liability insurance may provide either occurrence or claims-made coverage. The limits of liability shall be as follows:
- a. For occurrence coverage, at least \$1,000,000 for each occurrence and \$3,000,000 for all occurrences in any one policy year for occurrences on or after July 1, 1997.
  - b. For claims-made coverage, at least \$1,000,000 for each claim arising from an occurrence on or after July 1, 1997, and \$3,000,000 for all claims in any one reporting year for claims made on or after July 1, 1997.

Section 4.655.23(4)(c) of the statutes is created to read:

655.23(4)(c) 1. Except as provided in subd. 2., self-insurance shall be in the amounts of at least \$200,000 for each occurrence and \$600,000 for all occurrences in any one policy year for occurrences

before July 1, 1987, \$300,000 for each occurrence and \$900,000 for all occurrences in any one policy year for occurrences on or after July 1, 1987, and before July 1, 1988, \$400,000 for each occurrence and \$1,000,000 for all occurrences in any one policy year for occurrences on or after July 1, 1988, and before July 1, 1997, and \$1,000,000 for each occurrence and \$3,000,000 for all occurrences in any one policy year for occurrences on or after July 1, 1997.

2. Notwithstanding subd. 1., in the discretion of a self-insured health care provider, self-insurance may be in an amount that is less than \$1,000,000 but not less than \$600,000 for each occurrence on or after July 1, 1997, and before July 1, 1999, and less than \$1,000,000 but not less than \$800,000 for each occurrence on or after July 1, 1999, and before July 1, 2001.

Section 5.655.23(4)(d) of the statutes is created to read:

655.23(4)(d) The commissioner may promulgate such rules as the commissioner considers necessary for the application of the liability limits under par. (b) to reporting years following termination of claims-made coverage, including rules that provide for the use of actuarial equivalents.

Section 6. Effective date.

(1) This act takes effect on July 1, 1997.

### **First Lady Sue Ann Thompson Speaks at Nurses Summit on Women's Health Care**

Wisconsin First Lady Sue Ann Thompson was the featured speaker at the January Nurses' Summit on Women's Health Care in Wisconsin Dells. Thompson gave the opening address for the conference and discussed her efforts in spearheading efforts in 1997 to form the not-for-profit Wisconsin Women's Health Foundation.

The purpose of this summit was to identify issues related women's health in Wisconsin, identify the strengths and weaknesses of the current delivery system available to women and to identify ways in which Registered Nurses can play a more significant role in improving the quality of services offered through these health care networks.

The summit identified the following as areas in which nurses and other health care professionals could work to improve health care services for women in Wisconsin:

- \* Promotion of breast health along the life span.

- \* Promote health lifestyle principles among school age children.
- \* Work to increase health insurance coverage to 100%
- \* Develop nursing leadership in private industry and local and state government.
- \* Decrease incidence of domestic violence.
- \* Improve access in rural areas.
- \* Establish a goal of having 25% of Wisconsin births managed by Certified Nurse Midwives.

Principles guiding establishment of these goals included: need for partnerships, respect for individual autonomy, providing more incentives & choices, caring for our patients and ourselves, education and development of outcomes. The recommendations emerging from the summit will be used to formulate a comprehensive plan to bring about improvements to women's health issues in Wisconsin. Details on this strategy are still being developed, but will be announced soon.

### **Neumann Receives Commendation**

At the Annual Meeting of the National Council of State Boards of Nursing held in Albuquerque, New Mexico in August 1998, Tom Neumann completed his term as the president of the National Council. Neumann, who is the consultant to the Wisconsin Board of Nursing and education officer for the Department of Regulation & Licensing, served as president from 1996-1998. He provided leadership for the state boards' discussion and eventual endorsement of the mutual recognition model of nursing regulation.

### **Use of Nurse Technicians**

The nurse technician is a nursing student who either is currently enrolled in a nursing education program leading to registered nurse or practical nurse licensure, has graduated from such program and does not hold a temporary permit or who has been unsuccessful on the nursing licensure exam and is retaking the exam. This position applies to students or graduates who are employed by agencies or facilities outside of the nursing school program, and does not apply to the supervised clinical experience of the nursing school program. It also does not apply to the role or requirements of the graduate nurse (G.N.) or graduate practical nurse (G.P.N.) who hold a temporary permit.

The nurse technician always functions under the direct supervision of the registered nurse. Under sec. N6.02(6), Wis. Admin. Code, direct supervision means immediate availability to continually

coordinate, direct and inspect at first hand the practice of another. This has been interpreted by the Board of Nursing as requiring that the supervising RN must be in the same facility as the nurse technician.

Under sec. N6.03(3), Wis. Admin. Code, the RN may delegate acts within the scope of practice of professional nursing to the nurse technician if the RN does the following:

1. delegates tasks commensurate with educational preparation and demonstrated abilities of the nurse technician;
2. provides direction and assistance to the nurse technician;
3. observes and monitors the activities of the nurse technician; and,
4. evaluates the effectiveness of acts performed by the nurse technician.

The Board of Nursing cautions RNs, agencies and facilities that the nurse technician is not licensed to practice nursing either as an RN or LPN. The nurse technician functions as a result of tasks delegated by the RN who provides direct supervision. While tasks or procedures may be delegated to the nurse technician, the functions of assessment and evaluation may not. The nurse technician may assist the RN in these functions, but may not perform them in their entirety.

The nurse technician position may be beneficial to nursing students, graduates who do not hold a temporary permit or graduates who have been unsuccessful on the licensure exam, since it allows them an opportunity to gain from clinical experience apart from that of their nursing school program. In addition, it may be beneficial to the agency or facility, since the nurse technician may seek future employment there.

### **Board of Nursing Supports Mutual Recognition For Licensure**

At their meeting on November 5, 1998 the Board of Nursing unanimously passed a motion to support the implementation of the mutual recognition model for nurse licensure in Wisconsin. The board directed that legislation be drafted to enact the language of the model's interstate compact in statute.

Under the mutual recognition model, a nurse would hold only one license in the state of residency and would be able to practice in any state that has signed onto the interstate compact without holding an additional license. The nurse would also need to

comply with the laws and regulations of each state or practice. The impetus for a re-evaluation of the current licensing system has been the recent increase in nursing practice across state lines via telecommunications. Currently a Wisconsin nurse who performs assessment, counseling, teaching or recommends treatment to patients in other states by telephone is required to hold licenses in those states. The same is true for nursing care provided by fax, video phones, computers, and interactive television. A nurse who works for a large managed care organization and advises patients in multiple states must maintain licenses in all of those states. The model also provides for direct care of patients by nurses, including flight nurses, ambulance transport nurses and those who may live in border areas.

The mutual recognition model has been endorsed by all of the state boards of the National Council of State Boards of Nursing. However, each state board must submit the interstate compact language to their legislature for enactment. To date, Utah and Arkansas have adopted the interstate compact in statute making the mutual recognition approach a reality. Some twenty other states, including Wisconsin, are in the process of proposing legislation or drafting similar bills. The interstate compact is an agreement between two or more states established for the purpose of remedying a particular problem of multistate concern. In this case it would provide a mechanism for enabling multistate nursing practice while maintaining a state-based system of licensure and discipline.

The state boards of nursing have agreed that no state may implement the mutual recognition model prior to January 1, 2000. The necessary coordinated licensure information system through which compact states will communicate will not be operational until that date. In addition, rules and policies must be developed to guide boards in administering the provisions of the compact. Approximately 20 of the 61 boards of nursing plan to introduce legislation in the next two years which may lead to implementation of mutual recognition.

The Wisconsin board of Nursing and the Department of Regulation & Licensing support this model and will work collaboratively with nursing associations and organizations to achieve implementation here. You will be kept informed about further development of mutual recognition in Wisconsin through this newsletter. You may access the National Council's web site at <http://www.ncsbn.org> to receive more detailed, current information about mutual recognition.

### **NOTE:**

**Beginning with the next Regulatory Digest published by the Board of Nursing, names of nursing professionals subject to disciplinary action will be included in the digests. This is consistent with policies in place for all other professions subject to regulation by the Wisconsin Department of Regulation & Licensing.**

**DISCIPLINES**

**MADISON WI**

**SURRENDER**

Raised her voice to reprimand a patient and also slapped the patient's hand. She was discharged for violating work rules prohibiting striking or intimidating patients. Effective 9/17/98. N 7.04(4) Case #LS98091710NUR

**WINONA MN**

**REPRIMAND/EDUCATION**

Failed to assess a patient promptly after receiving a report of respiratory distress. Ordered to complete 16 hours of continuing education. Ordered to pay costs of \$200. Effective 9/17/98. Sec. 441.07(1)(d), Stats. N 7.04(4) Case #LS9809176NUR

**OOSTBURG WI**

**SUSPENDED INDEFINITELY**

Admitted the theft of controlled substances from her place of employment for her personal use. On 5/12/97, she was convicted in Sheboygan County Circuit Court of unlawful possession of controlled substances. Effective 11/5/98. N 7.03(2), 7.04(1) (2)(15). Case #LS9808131NUR

**MILWAUKEE WI**

**SUSPENDED**

Disciplined by the board in 1981 for diversion of Demerol and Mepergan from her place of employment. Terminated from employment following an investigation of missing controlled substances from her locked medical cart. For the period 12/27/96 through 1/18/97 over 131 tablets of controlled substances were listed as missing from her cart. She denies diverting any of the drugs. Her license is suspended indefinitely. Effective 9/17/98. Sec. 441.07(1)(b)(c)(d), Stats. N 7.04(1)(2)(15) Case #LS98091712NUR

**CRYSTAL LAKE IL**

**REVOKED**

On 4/23/98 convicted in Marathon County Circuit Court of the crimes of theft and possession of an illegally-obtained prescription drug. The offenses occurred during April of 1997 while she was employed at a health care facility under the name of Maureen E. Gardner. Ordered to pay the costs of the proceedings. Effective 11/5/98. N 7.04(1)(2) Case #LS9806161NUR

**MAZOMANIE WI**

**SURRENDER**

Facility medical records indicated she had signed out Tylenol #3 for a resident at 3 PM, 7 PM and 10:45 PM. The resident denied receiving the medication. She denies diverting the controlled substances but admits to chronic alcohol dependency which has affected her judgment and concentration in the work place. She is not currently practicing as a nurse and tenders the voluntary surrender of her license. Effective 9/17/98. Sec. 441.07, Stats. N 7.03(2) and N 7.04(1)(2)(15) Case #LS9809179NUR

**WAUWATOSA WI**

**SUSPENDED**

Terminated from her employment following several incidents at the residence of a home health patient involving the handling of controlled substances. An evaluation resulted in a diagnosis of alcohol dependence. Her license is suspended indefinitely. Effective 9/17/98. N 7.03(2) N 7.04(1)(2)(15) Case #LS98091713NUR

**HAYWARD WI**

**SUSPENDED INDEFINITELY**

Does not admit, but for purposes of this action alone, she does not contest that while employed she diverted Vicodin, Ativan and Serax for her personal use. Effective 11/5/98. N 7.03(2), N 7.04(1)(2)(15). Case #LS9809091NUR

**IRON RIVER WI**

**REPRIMAND/EDUCATION**

Administered a tube feeding to a resident through the drainage bag rather than the feeding tube. Ordered to complete 30 hours of continuing education. Ordered to pay costs of \$100. Effective 9/17/98. Sec. 441.07(1)(b), Stats. N 7.03(1)(b). Case #LS9809178NUR

**SHEBOYGAN WI**

**REVOKED**

An evaluation of his condition resulted in a diagnosis of poly drug dependence and depressive disorder. In June 1997, while employed as an emergency room nurse, he diverted 7 100 mg. Demerol carpujets from emergency room supplies for his own use. On 7/15/98 he was convicted in the Sheboygan County Circuit Court of the criminal offense of injury by intoxicated use of a vehicle and was sentenced to 54 months in prison. He has tendered the voluntary revocation of his license. Effective 9/17/98. Sec. 441.07, Stats. N 7.03(2), N 7.04(1)(2)(15) Case #LS9809171NUR

**MILWAUKEE WI**

**REPRIMAND**

Removed medical records from her place of employment and failed to return them despite several requests. She eventually returned them to release a hold her school had placed on her transcripts. Ordered to pay costs of \$100. Effective 11/5/98. N 7.04(10) Case #LS9811047NUR

**MENOMONIE WI**

**REVOKED**

During the period of June, 1997 through December 14, 1997, while employed as a nurse, it's alleged she diverted controlled substances including hydrocodone and morphine from her place of employment for her personal use on more than 100 occasions. She was allegedly recorded on videotape stealing drugs from a pharmacy at the care center. She later admitted to law enforcement personnel that she also diverted controlled substances from med carts. It's also alleged she diverted controlled substances from other employers in January 1997 and December 1997. Criminal charges are pending. She admits to chemical impairment but declined to obtain an AODA evaluation and is not in treatment for her condition. She is not currently practicing as a nurse and tenders the voluntary revocation of her license. Effective 9/17/98. Sec. 441.07, Stats. N 7.03(2) and N 7.04(1)(2)(15). Case #LS9809173NUR

JANESVILLE WI REPRIMAND  
During the period 11/17/97 through 1/22/98 she made the following medication errors which led to her suspension: administered insulin before notifying the attending physician of a blood sugar level; administered medication to the wrong resident; did not notify physician of a blood sugar level for 3 days. She has participated in inservice educational sessions and monitoring and completed a course in basic pharmacology which included medication administration. Effective 9/17/98. Sec. 441.07(1)(b)(c)(d), Stats. N 7.03(1)(a)(b)(c) and N 7.04 (15). Case #LS9809174NUR

WEST ALLIS WI SUSPENDED  
While on duty altered a physician's order by adding a prescription order for 50 mg of Ultram, a prescription medication, and then faxing the order to a pharmacy. She denies that she was attempting to obtain Ultram for her personal use. Her license is suspended at least one year. The suspension is stayed with conditions and limitations imposed. Effective 9/18/98. N 7.04(2)(6)(15) Case #LS9809181NUR

SHEBOYGAN WI SURRENDER  
On or about 7/15/98 he was found guilty of injury by intoxicated use/vehicle. Effective 9/17/98. Sec. 441.07(1)(c), Stats. N7.04(1) Case #LS9809172NUR

WAUWATOSA WI REPRIMAND  
On 3/11/98, while employed as a registered nurse, she was administered a urine drug test as part of an investigation into missing controlled substances at the facility. The drug test report was positive for Xanax and Darvocet. There is insufficient evidence that she was responsible for the missing controlled substances. She admitted she obtained Darvocet without a prescription for her personal use from an aunt to treat

headache. In her explanation she stated "she wasn't giving me bottles of pills; she would put a handful in an envelope." She did have a 1996 prescription for Xanax which she claims was used by her in March of 1998. There is no indication in her medical record of a chemical dependency. Effective 9/17/98. Sec. 441.07(1)(b)(d), Stats. N 7.04(1)(2)(15) Case #LS9809175NUR

PRAIRIE DU CHIEN WI SURRENDER  
On 3/27/98 while employed at a nursing home she diverted controlled substances from her place of employment for her personal use, including 27 tablets of propoxyphene. Effective 11/5/98. Sec. 441.07, Stats. N 7.04(1)(15) Case #LS9811056NUR

PITTSBURGH PA REPRIMAND  
While working in an emergency room she failed to maintain appropriate patient charting and lost track of medications she removed from the medical cabinet. She stated her judgment failed her and she documented the medication as being wasted by a physician. There were no physician orders for the balance. She denies diverting any of the controlled substances. Effective 11/5/98. Sec. 441.07(1)(b)(c)(d), Stats. N 7.04(1)(2)(15) Case #LS9811053NUR

GREEN BAY WI REPRIMAND  
On 3/1/98 her nursing registration expired. Did not renew until on or about 6/3/98. Admits she worked as a nurse during the time her license was expired. Ordered to pay costs of \$75.00. Effective 9/17/98. Sec. 441.10(3)(b), Stats. N 7.04(15) Case #LS9809177NUR

MIDDLETON WI REPRIMAND  
Nursing registration expired on 3/1/98 and did not renew until on or about 6/9/98. Worked as a nurse during the time her license was expired. Ordered to pay costs of \$75.00. Effective 9/17/98. Sec. 441.10(3)(b), Stats. N 7.04(15) Case #LS98091711NUR

MILWAUKEE WI REPRIMAND  
On 3/1/98 her nursing registration expired. Did not renew until 7/9/98. Worked as a nurse during the time her license was expired. Ordered to pay costs of \$75.00. Effective 11/5/98. Sec. 441.06(3), Stats. N 7.04(15) Case #LS9811058NUR

NEENAH WI REPRIMAND  
Nursing registration expired on 3/1/98. Did not renew until 7/16/98. During that period of time she worked as a registered nurse. Ordered to pay costs of \$75.00. Effective 11/5/98. Sec. 441.10(3)(b), Stats. N 7.04(15) Case #LS9811052NUR

LAKE GENEVA WI

REPRIMAND

On 3/1/98 her nursing registration expired. Did not renew until 7/15/98. During that period of time she worked as a nurse. Ordered to pay costs of \$75.00. Effective 11/5/98. Sec. 441.10(3)(b), Stats. N 7.04(15) Case #LS9811055NUR.



Department of Regulation and Licensing  
Board of Nursing  
P.O. Box 8935  
Madison, WI 53708-8935

Return Service Requested

# REGULATORY DIGEST

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## Telephones

**Automated Phone System for Chiropractic, Acupuncture, Massage Therapists and Bodyworkers, Music Art and Dance, Marriage & Family Therapists, Nursing, Optometry, Professional Counselors, Psychology, & Social Workers: (608) 266-0145**

Press 1, then 4    **Application Requests for License & Continuing Education**

Press 2            **Information on Status of Pending Applications**

Press 3            **Information on Renewal, Verifications Letters of Good Standing & Name or Address Changes.**

Press 4            **Complaint Filing Information**

Press 5            **Application Questions**

Press 6            **Repeat Menu Choices**

**FAX: (608) 261-7083**

## Quick Keys

The following voice mail “short cuts” could be sent out with renewal notices and/or otherwise published:

To request a license application for your profession, just dial (608) 266-0145, then enter the Quick Key numbers below for the profession you want:

Registered Nurse Endorsement:	Press 1-2
Licensed Practical Nurse Endorsement:	Press 1-2-2
Registered Nurse Exam	Press 1-2-3
Licensed Practical Nurse Exam	Press 1-2-4
Foreign Nursing Graduate	Press 1-2-5
Advanced Practice Nurse Prescriber	Press 1-2-6
Nurse Midwife	Press 1-2-7

## Verifications

All requests for verification of license status must be in writing. There is no charge for this service.

## Endorsements

Requests for endorsements to other states must be in writing. The cost is \$10. Please make check or money order payable to the Department of Regulation and Licensing.

## Digest on Web Site

The November 1997, June, 1998, and September, 1998, digests are on the Web.

## Visit the Department's Web Site

<http://badger.state.wi.us/agencies/drl/>  
Send comments to [dorl@mail.state.wi.us](mailto:dorl@mail.state.wi.us)

## Board of Nursing Meeting Dates:

March 4-5, 1999	September 16-17, 1999
May 13-14, 1999	November 4-5, 1999
July 8-9, 1999	

## Change of Name or Address?

Please photocopy the mailing label of this digest, make changes in name or address, and return it to the Department. Confirmation of changes are not automatically provided.

## Wisconsin Statutes and Code

Copies of the Wisconsin Statutes and Administrative Code for the Board of Nursing can be ordered through the Board Office. Include your name, address, county and a check payable to the Department of Regulation and Licensing in the amount of \$5.28. The latest edition is dated December, 1998.

**WIS. STATS. S. 440.11 ALLOWS FOR A \$50 PENALTY TO BE IMPOSED WHEN CHANGES ARE NOT REPORTED WITHIN 30 DAYS.**